



3-906
10 1623 378

CO/C

Docket No.: 20269/1201776-US3
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Letters Patent of:

Jay D. Kranzler et al.

Patent No.: 6,992,110 *B2*

Issued: January 31, 2006

For: METHODS OF TREATING FIBROMYALGIA
SYNDROME, CHRONIC FATIGUE
SYNDROME AND PAIN

Certificate

MAR 13 2006

of Correction

**REQUEST FOR CERTIFICATE OF CORRECTION
PURSUANT TO 37 CFR 1.322**

Attention: Certificate of Correction Branch
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Upon reviewing the above-identified patent, Patentee noted a Patent Office error which should be corrected.

In the Specification please insert:

-- This patent is subject to a Terminal Disclaimer --.

The error was not in the application as filed by applicant; accordingly no fee is required.

Enclosed please find copies of the Amendment Transmittal Letter and the Terminal Disclaimer accepted by the Patent Office dated June 27, 2005.

Transmitted herewith is a proposed Certificate of Correction effecting such amendment.
Patentee respectfully solicits the granting of the requested Certificate of Correction.

Dated: March , 2006

Respectfully submitted,

By 

Flynn Barrison

Registration No.: 53,970
DARBY & DARBY P.C.
P.O. Box 5257
New York, New York 10150-5257
(212) 527-7700
(212) 527-7701 (Fax)
Attorneys/Agents For Applicant

UNITED STATES PATENT AND TRADEMARK OFFICE
CERTIFICATE OF CORRECTIONPage 1 of 1PATENT NO. : 6,992,110 *B2*

APPLICATION NO. : 10/623,378

ISSUE DATE : January 31, 2006

INVENTOR(S) : Jay D. Kranzler et al.

It is certified that an error appears or errors appear in the above-identified patent and that said Letters Patent is hereby corrected as shown below:

In the Specification please insert:

-- This patent is subject to a Terminal Disclaimer --.

MAILING ADDRESS OF SENDER (Please do not use customer number below):

Flynn Barrison

DARBY & DARBY P.C.

P.O. Box 5257

New York, New York 10150-5257

1

MAR 15 2006

**Terminal Disclaimer**

The terminal disclaimers filed on June 16, 2005 disclaiming the terminal portion of any patent granted on this application which would extend beyond the expiration dates of 6,602,911, 6,635,675 and 10/623,431 have been reviewed and is accepted.

The terminal disclaimers have been recorded.

Conclusion

Any inquiry concerning this communication or earlier communications from the examiner should be directed to Examiner Cook whose telephone number is (571) 272-0571. The examiner can normally be reached on Monday through Thursday.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Christopher Low, can be reached on (571) 272-0951.

Any inquiry of a general nature or relating to the status of this application or proceeding should be directed to Renee Jones (571) 272-0547 in Customer Service.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see <http://pair-direct.uspto.gov>. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free).

The official fax number is 571-273-8300.

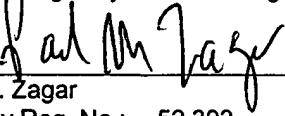
Rebecca Cook

A handwritten signature in black ink that appears to read "Rebecca Cook".

Primary Examiner
Art Unit 1614

June 27, 2005



AMENDMENT TRANSMITTAL LETTER				Docket No. 20269/1201776-US3
Application No. 10/623,378	Filing Date July 18, 2003	Examiner R. Cook	Art Unit 1614	
Applicant(s): Jay D. Kranzler et al.				
Invention: METHODS OF TREATING FIBROMYALGIA SYNDROME, CHRONIC FATIGUE SYNDROME AND PAIN				
TO THE COMMISSIONER FOR PATENTS				
Transmitted herewith is an amendment in the above-identified application.				
The fee has been calculated and is transmitted as shown below.				
CLAIMS AS AMENDED				
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate
Total Claims	10	- 20 =		x
Independent Claims	1	- 3 =		x
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				
Other fee (please specify): <i>Terminal Disc/gimers</i> <i>\$130</i>				
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: <i>\$ 130.00</i>				
<input type="checkbox"/> Large Entity		<input checked="" type="checkbox"/> Small Entity		
<input checked="" type="checkbox"/> No additional fee is required for this amendment.				
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.				
<input checked="" type="checkbox"/> A check in the amount of \$ <i>130</i> to cover the filing fee is enclosed.				
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.				
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <i>04-0100</i> as described below. A duplicate copy of this sheet is enclosed.				
<input checked="" type="checkbox"/> Credit any overpayment.				
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.				
 Dated: <u>June 16, 2005</u>				
Paul M. Zagar Attorney Reg. No.: 52,392				
DARBY & DARBY P.C. P.O. Box 5257 New York, New York 10150-5257 (212) 527-7770				
Express Mail Label No. _____ Dated: _____				



TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/623,378
		Filing Date	July 18, 2003
		First Named Inventor	Jay D. Kranzler
		Art Unit	1614
		Examiner Name	R. Cook
Total Number of Pages in This Submission		Attorney Docket Number	
		20269/1201776-US3	

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input checked="" type="checkbox"/> Terminal Disclaimer (patent and appln.) <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <i>check for \$130</i>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	DARBY & DARBY P.C.		
Signature	<i>Paul M. Zagar</i>		
Printed name	Paul M. Zagar		
Date	June 16, 2005	Reg. No.	52,392

Express Mail Label No.

Dated: _____



Application No. (if known): 10/623,378

Attorney Docket No.: 20269/1201776-US3

Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. in an envelope addressed to:

EU 778823012-US

Attention: Certificate of Correction Branch
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

on March 7, 2006
Date

B.W. Lee

Signature

B.W. Lee

Typed or printed name of person signing Certificate

Registration Number, if applicable

Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Certificate of Correction (1 page)
Request for Certificate of Correction (2 pages)
Copy of Amendment Transmittal Letter and the Terminal
Disclaimer (2 pages)
Return Postcard